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1723**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/575,820		
Filing Date	April 13, 2006		
First Named Inventor	Steve C. Benesi		
Art Unit	Unknown		
Examiner Name	Unknown		
Total Number of Pages in This Submission	3	Attorney Docket Number	SCB-0005

**ENCLOSURES (Check all that apply)**

- ☐ Fee Transmittal Form
- ☐ Fee Attached
- ☐ Amendment/Reply
  - ☐ After Final
  - ☐ Affidavits/declaration(s)
- ☐ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Documents
- ☐ Reply to Missing Parts/  
Incomplete Application
  - ☐ Reply to Missing Parts  
under 37 CFR 1.52 or 1.53

- ☐ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a  
Provisional Application
- ☒ Power of Attorney, Revocation  
Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) \_\_\_\_\_
- ☐ Landscape Table on CD

- ☐ After Allowance Communication to TC
- ☐ Appeal Communication to Board  
of Appeals and Interferences
- ☐ Appeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☒ Other Enclosure(s) (please identify  
below): Return Receipt Post Card

**Remarks**

The Commissioner is hereby authorized to charge any fees due with this communication to Deposit Account No. 03-4075. A duplicate copy of this authorization is enclosed.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	The Law Offices of James R. Cypher		
Signature			
Printed name	Charles R. Cypher		
Date	May 5, 2006	Reg. No.	41,694

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Tracy L. Morton	Date	May 5, 2006

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PTO/SB/82 (01-06)  
Approved for use through 12/31/2008. OMB 0851-0035  
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**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	Natl Phase-PCT/US04/18644
Filing Date	12 JUNE 2004
First Named Inventor	Steve C. BENESI
Art Unit	
Examiner Name	
Attorney Docket Number	SCB-0005

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

0498

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
Customer Number:

0498

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Email		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	Steve C. BENESI		
Date	4/18/06	Telephone	510-232-2653

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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